

County: Manitowoc
HAMILTON MEMORIAL HOME
1 HAMILTON DRIVE

Facility ID: 4020

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TWO RIVERS 54241 Phone: (920) 793-2261
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/01): 85
Total Licensed Bed Capacity (12/31/01): 85
Number of Residents on 12/31/01: 82

Ownership: Limited Liability Company
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? No
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 75

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)			
		Primary Diagnosis	%	Age Groups	%				%
Home Health Care	No					Less Than 1 Year		35.4	
Supp. Home Care-Personal Care	No					1 - 4 Years		43.9	
Supp. Home Care-Household Services	No	Developmental Disabilities	2.4	Under 65	9.8	More Than 4 Years		20.7	
Day Services	No	Mental Illness (Org./Psy)	12.2	65 - 74	12.2				
Respite Care	No	Mental Illness (Other)	9.8	75 - 84	22.0			100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	50.0	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	6.1	Full-Time Equivalent			
Congregate Meals	No	Cancer	4.9			Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	1.2		100.0	(12/31/01)			
Other Meals	No	Cardiovascular	13.4	65 & Over	90.2				
Transportation	No	Cerebrovascular	14.6			RNs		11.2	
Referral Service	No	Diabetes	11.0	Sex	%	LPNs		4.9	
Other Services	No	Respiratory	6.1			Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	24.4	Male	17.1	Aides, & Orderlies			
Mentally Ill	No			Female	82.9				
Provide Day Programming for			100.0						
Developmentally Disabled	No				100.0				

Method of Reimbursement

Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care		Managed Care							
Level of Care	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	Total Resi - dents	% Of All
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	1	5.0	133	0	0.0	0	0	0.0	0	1	1.2
Skilled Care	0	0.0	0	46	74.2	109	0	0.0	0	19	95.0	124	0	0.0	0	0	0.0	0	65	79.3
Intermediate	---	---	---	16	25.8	91	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	16	19.5
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		62	100.0		0	0.0		20	100.0		0	0.0		0	0.0		82	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	30.8	Daily Living (ADL)	Independent			
Private Home/With Home Health	1.9	Bathing	7.3	58.5	34.1	82
Other Nursing Homes	7.7	Dressing	29.3	34.1	36.6	82
Acute Care Hospitals	59.6	Transferring	24.4	32.9	42.7	82
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	37.8	32.9	29.3	82
Rehabilitation Hospitals	0.0	Eating	63.4	18.3	18.3	82
Other Locations	0.0	*****				
Total Number of Admissions	52	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	6.1	Receiving Respiratory Care		4.9
Private Home/No Home Health	8.3	Occ/Freq. Incontinent of Bladder	41.5	Receiving Tracheostomy Care		1.2
Private Home/With Home Health	8.3	Occ/Freq. Incontinent of Bowel	29.3	Receiving Suctioning		1.2
Other Nursing Homes	0.0			Receiving Ostomy Care		1.2
Acute Care Hospitals	4.2	Mobility		Receiving Tube Feeding		1.2
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	7.3	Receiving Mechanically Altered Diets		18.3
Rehabilitation Hospitals	2.1					
Other Locations	0.0	Skin Care		Other Resident Characteristics		
Deaths	77.1	With Pressure Sores	7.3	Have Advance Directives		92.7
Total Number of Discharges		With Rashes	2.4	Medications		
(Including Deaths)	48			Receiving Psychoactive Drugs		7.3

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	88.2	82.5	1.07	86.4	1.02	85.8	1.03	84.6	1.04
Current Residents from In-County	92.7	74.3	1.25	69.6	1.33	69.4	1.34	77.0	1.20
Admissions from In-County, Still Residing	50.0	19.8	2.52	19.9	2.51	23.1	2.16	20.8	2.40
Admissions/Average Daily Census	69.3	148.2	0.47	133.4	0.52	105.6	0.66	128.9	0.54
Discharges/Average Daily Census	64.0	146.6	0.44	132.0	0.48	105.9	0.60	130.0	0.49
Discharges To Private Residence/Average Daily Census	10.7	58.2	0.18	49.7	0.21	38.5	0.28	52.8	0.20
Residents Receiving Skilled Care	80.5	92.6	0.87	90.0	0.89	89.9	0.89	85.3	0.94
Residents Aged 65 and Older	90.2	95.1	0.95	94.7	0.95	93.3	0.97	87.5	1.03
Title 19 (Medicaid) Funded Residents	75.6	66.0	1.15	68.8	1.10	69.9	1.08	68.7	1.10
Private Pay Funded Residents	24.4	22.2	1.10	23.6	1.03	22.2	1.10	22.0	1.11
Developmentally Disabled Residents	2.4	0.8	3.25	1.0	2.35	0.8	3.25	7.6	0.32
Mentally Ill Residents	22.0	31.4	0.70	36.3	0.60	38.5	0.57	33.8	0.65
General Medical Service Residents	24.4	23.8	1.02	21.1	1.16	21.2	1.15	19.4	1.26
Impaired ADL (Mean)	50.2	46.9	1.07	47.1	1.07	46.4	1.08	49.3	1.02
Psychological Problems	7.3	47.2	0.16	49.5	0.15	52.6	0.14	51.9	0.14
Nursing Care Required (Mean)	4.7	6.7	0.71	6.7	0.70	7.4	0.63	7.3	0.64